PATITION FOR EXTENSION OF THE	PRITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2005 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)		
Application Number 10/051	762	Filed / (16/	2002
For Variable 6 air Low 1	Voice Amplifier to	Reduce Lineari	F Reg
Art Unit 26 85	· v	Examiner Le	Lana N
This is a request under the provisions of application.	37 CFR 1.136(a) to extend the	period for filing a reply in the	e above identified
The requested extension and fee are as	ollows (check time period desi	• • • • • • • • • • • • • • • • • • • •	e fee below):
_	<u>Fee</u>	Small Entity Fee	\$ 60
One month (37 CFR 1.17(a)(1)) \$120	\$60	\$
Two months (37 CFR 1.17(a)(2)) \$450	\$225	\$
Three months (37 CFR 1.17	7(a)(3)) \$1020	\$510	\$
Four months (37 CFR 1.17)	(a)(4)) \$1590	\$795	\$
Five months (37 CFR 1.17(a)(5)) \$2160	\$1080	\$
Applicant claims small entity status.	See 37 CFR 1.27.		
A check in the amount of the fee	is enclosed.		
Payment by credit card. Form PT			•
The Director has already been as		his application to a Depos	sit Account
The Director is hereby authorized			
Deposit Account Number		have enclosed a duplicate	
Deposit Account Number	av become public. Credit card in	nformation should not be incl	ided on this form
WARNING: Information on this form m			
WARNING: Information on this form m			
WARNING: Information on this form m		,	
WARNING: Information on this form m Provide credit card information and au I am the applicant/inventor. assignee of record		ed (Form PTO/SB/96).	
WARNING: Information on this form me Provide credit card information and audit and the applicant/inventor. assignee of record Statement under	of the entire interest. See 3	ed (Form PTO/SB/96).	·
WARNING: Information on this form me Provide credit card information and audit and the applicant/inventor. assignee of record Statement under attorney or agent of attorney or a	of the entire interest. See 3 of record. Registration Numl	ed (Form PTO/SB/96).	·
WARNING: Information on this form me Provide credit card information and audit and the applicant/inventor. assignee of record Statement under attorney or agent of attorney or a	of the entire interest. See 3 or 37 CFR 3.73(b) is enclosed frecord. Registration Number 1985.	ed (Form PTO/SB/96).	
WARNING: Information on this form me Provide credit card information and audit and the applicant/inventor. assignee of record Statement under attorney or agent of attorney or a	of the entire interest. See 3 er 37 CFR 3.73(b) is enclose of record. Registration Number 37 CFR 1.34. In facting under 37 CFR 1.34	ed (Form PTO/SB/96).	4 0 5
WARNING: Information on this form me Provide credit card information and audit and the applicant/inventor. assignee of record Statement under Statement under attorney or agent under Registration number Applicant Applica	of the entire interest. See 3 er 37 CFR 3.73(b) is enclose of record. Registration Number 37 CFR 1.34. In facting under 37 CFR 1.34	ed (Form PTO/SB/96). ber 43,178	Date
WARNING: Information on this form me Provide credit card information and audit and the applicant/inventor. assignee of record Statement under Statement under attorney or agent under Registration number Applicant Applica	of the entire interest. See 3 er 37 CFR 3.73(b) is enclose of record. Registration Number 37 CFR 1.34. For if acting under 37 CFR 1.34	ed (Form PTO/SB/96). ber 43,178 2 310-52	Date

This collection of information is required by 37 CFR 1.136(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 6 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PTO/SB/17 (12-04v2) Approved for use through 07/31/2006. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number Complete if Known A THAI Effective on 12/08/2004. suant to the Consolidated Appropriations Act, 2005 (H.R. 4818). 10/051,762 Application Number TRANSMIT Filing Date 1/16/2002 For FY 2005 First Named Inventor John Groe **Examiner Name** Le, Lana N. Applicant claims small entity status. See 37 CFR 1.27 Art Unit 2685 TOTAL AMOUNT OF PAYMENT Attorney Docket No. 000110 METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify): Deposit Account Deposit Account Number: Deposit Account Name: For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES EXAMINATION FEES** SEARCH FEES **Small Entity** Small Entity **Small Entity** Fees Paid (\$) **Application Type** Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Utility 300 150 500 250 200 100 200 Design 100 100 130 50 65 Plant 200 100 300 150 160 80 Reissue 300 150 500 600 250 300 Provisional 200 100 0 0 0 0 Small Entity 2. EXCESS CLAIM FEES Fee (\$) **Fee Description** <u>Fee (\$)</u> 50 25 Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues) 200 100 180 Multiple dependent claims 360 **Total Claims** Fee Paid (\$) **Multiple Dependent Claims** Extra Claims Fee (\$) - 20 or HP = Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. Indep. Claims **Extra Claims** Fee (\$) Fee Paid (\$) - 3 or HP = HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50

Other (e.g.				
SUBMITTED BY				
Signature	Warm	Yand fun	Registration No. (Attorney/Agent) 43,178	Telephone 510 521-6980
Name (Print/Type)	Daniel Tagliaferri			Date 2/4/2005

Number of each additional 50 or fraction thereof

(round up to a whole number) x

Fee (\$)

Fee Paid (\$)

Fees Paid (\$)

sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Extra Sheets

Non-English Specification, \$130 fee (no small entity discount)

Total Sheets

4. OTHER FEE(S)

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.